## REMARKS/ARGUMENTS

Claims 1-19, 21-38, 41-47, 49-66 and 69-76 are pending.

Claims 49-66 and 69-76 have been amended as a method claims with steps consistent with the changes previously entered for Claims 21-46.

No new matter is added.

The rejection of Claim 1 under 35 USC 112, second paragraph is maintained due to the expression "a stereoisomer thereof, an enantiomer thereof, a diastereomer thereof or a racemate thereof,...".. What constitutes a stereoisomer, racemate, etc. of a chemical molecule is well-within the knowledge of those skilled in this field and as such cannot be considered indefinite. Further, as certain substituents are provided in the compound of the general formula, some isomers, etc. will be dictated by those groups, again something that is well-known in the field.

Reconsideration of this position and withdrawal of the rejection is requested.

The rejection of rejoined Claims 49-74 under 35 USC 101 is no longer applicable in light of the amendments submitted to these claims. Also, Claim 49 is amended as Claim 21 but depending on Claim 10 rather than Claim 1. Withdrawal of the rejection is requested.

The rejection of Claims 21, 35-42 and 44-45 under 35 USC 112, first paragraph while recognizing that the specification enables certain methods, the rejection outlined why others are not so enabled. Applicants respectfully disagree.

Those diseases or disorders identified in the rejection are cognitive memory disorders (Claims 21, 35, 49, and 63), Alzheimer's Disease (Claims 21, 37, 45 and 65), Multiple Sclerosis (Claims 40 and 68), Huntington's Disease (Claims 39 and 67),

dementia (Claims 21, 41, 49, and 72), senile dementia processes (Claims 36 and 64), disorders of the CNS (Claims 21, 44, 49, and 72), schizophrenia (Claims 21, 45, 49 and 73), and psychosis (Claims 21, 42, 49 and 70).

Claims 39 and 40 as well as Claims 67 and 68 directed to Huntington's and Multiple sclerosis have been cancelled.

Claims 21 and 49 have been amended as suggested in the Action to include the list of diseases mentioned in Claims 35-38, 41-42 and 44-45.

As to the diseases or disorders that are considered not enabled, Applicants ask that this position be reconsidered in light of the attached documents that show the relationship between the 5-HT<sub>6</sub> receptor and the disease and disorders. The attached references are:

- 1 Virginie da Silva et al., Neuropsychopharmacology (2008), 1-13: schizophrenia (Claim 45) and Alzheimer (Claim 37).
- 2 Andrew Foley et al., Neuropsychopharmacology (2004) 29, 93-100: agerelated decline in neural function (Claim 36).
- 3 Andrew Foley et al., Neuropharmacology 54 (2008), 1166-1174: age/neurodegenerative related memory disorders (Claim 36).
- 4 Kevin Fone, Neuropharmacology 55 (2008), 10153-1022: schizophrenia (Claim 45) and Alzheimer (Claim 37).
- 5 Jöerg Holenz et al., Drug Discovery Today, Vol. 11, Numbers 7/8, April 2006: Alzheimer (Claim 37), schizophrenia (Claim 45) and anxiety (Claim 44).
- 6 Christopher Johnson et al., Current Opinion in Drug Discovery &

Development 2008 Vol. 11 No. 5: <u>Alzheimer (Claim 37)</u>, vascular dementia (Claim 41), Parkinson (Claim 38) and schizophrenia (Claim 45).

- 7 M.V. King et al., Neuropharmacology 47 (2004), 195-204: enhance cognitive process (Claim 35).
- 8 Madeleine King et al., Trends in Pharmacology Sciences 2008 Aug. 7 [Epub ahead of print]: schizophrenia (Claim 45), Alzheimer (Claim 37) and depression (Claim 44).
- 9 Florence Loiseau et al., Psychopharmacology (2008), 196:93-104: <u>psychiatric</u> disorders in which cognitive function is <u>compromised</u> (Claim 42).
- 10 B. Marcos et al., British Journal of Pharmacology (2008) 155, 434-440: schizophrenia (Claim 45) and Alzheimer (Claim 37).
- 11 Ellen S. Mitchell et al., Pharmacology, Biochemistry and Behavior 88 (2008) 291-298: schizophrenia (Claim 45).
- 12 Nikolaos Pitzikas et al., Behavioural Brain Research 2007: <u>schizophrenia-like</u> <u>symptoms (Claim 45)</u>.
- 13 Rudy Schreiber et al., European Neuropsychopharmacology (2007) 17, 277-288: cognition (Claim 35) and psychosis (Claim 42).
- 14 Marie L. Woolley et al., Psychopharmacology (2003), 170:358-367: regulation in cognitive function (Claim 35).

Reconsideration and withdrawal of the rejection is requested.

A Notice of Allowance is also requested.

Respectfully submitted,

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